

8433748967

Main Street Elementary

08:16:15 a.m.

01-22-2019

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**Complete Form, Print, Sign and Mail to:**  
Public Service Commission of South Carolina  
101 Executive Center Dr., Suite 100  
Columbia, SC 29210



Phone: 803-896-510

Fax: 803-896-519

www.psc.sc.gov

Text PSCAGENDAS to 3949

To receive an alert when Meeting Agendas are released

## Individual Complaint Form

Date 01/11/2019

## Complainant or Legal Representative Information:

\* Required Fields

Name \*

Deborah Staggars

Firm (if applicable)

N/A

Mailing Address \*

404 Charleston Avenue

City, State Zip \*

Lake City, SC 29560Phone \* (843) 433-6561

E-mail

heaviedee@hotmail.com

Name of Utility Involved in Complaint: \*

Duke Energy

## Type of Complaint (check appropriate box below.) \*

- ☒ Billing Error/Adjustments ☐ Deposits and Credit Establishment ☐ Wrong Rate ☐ Refusal to Connect Service  
☐ Disconnection of Service ☐ Payment Arrangements ☐ Water Quality ☐ Line Extension Issue  
☐ Service Issue ☐ Meter Issue  
☐ Other (be specific) \_\_\_\_\_

Have you contacted the Office of Regulatory Staff (ORS)? \*

☒ Yes ☐ No

Name of

ORS Contact:

Brian Kirby

## Concise Statement of Facts/Complaint: \* (This section must be completed. Attach additional information to this page if necessary.)

Being given wrong information and following through with the info. that was given. I contacted them 3x but was given same info. I agreed on a pymt. date b/c rep. told me that was as far as they could go. Attempted to seek help thru govt. agency BUT due to govt shut down they couldn't start screening til wk. of 1/14/19 But I was still treated in a degrading matter. This caused me a letter of Not Keeping a pay as agreed.

## Relief Requested: \* (This section must be completed. Attach additional information to this page if necessary.)

Anything feasible for the dehumanizing, degrading incident. This is something negotiable; as I'm not abreast of what the relief policy entails.

**\*\*I GIVE THE PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA PERMISSION TO PUBLISH THIS COMPLAINT AND ITS CONTENTS ON THE COMMISSION'S WEBSITE (dms.psc.sc.gov), AND I UNDERSTAND SUCH INFORMATION MAY BE SUBJECT TO PUBLIC SCRUTINY OR FURTHER RELEASE.** ☒ ☐

Complainant's Signature\* (MUST BE SIGNED, DO NOT PRINT)

Deborah Staggars

STATE OF SOUTH CAROLINA )

COUNTY OF Florence )

## VERIFICATION

I, Deborah Staggars

Complainant's Name \*

verify that I have read my complaint filed on

Date \*

1/11/2019

and know the contents thereof, and that said contents are true.

Deborah Staggars

Complainant's Signature\* (MUST BE SIGNED, DO NOT PRINT)

## Internal Use Only

Processed By	Date
H.E.	